

## TOGETHER, WE ARE STRONGER

- In 2003, EMHS entities saved \$997,400 on capital equipment and \$958,432 on supplies by purchasing together. This is on top of discounts through our national consortium purchasing initiative.
- Annually, EMHS saves \$2 million dollars by combining workers compensation funds in our self insured trust.
- EMHS hospitals obtain rates of short term working capital 3% less than stand alone hospitals by negotiating rates as a system and maintaining an A+ financial rating.
- EMHS entities have booked approximately \$6 million in grant revenues in the 2004 fiscal year by working together as a team. This compares to \$500,000 in 2000.
- Since EMHS created LifeFlight in 1998, 3033 patients have been served by this unique critical care service.
- Since EMHS developed the region's only tertiary, acute psychiatric facility in 1992, Acadia Hospital has provided 17,471 inpatient admissions, 68,811 outpatient visits, and 2599 partial hospitalizations. Its Access Center has received 128,870 calls from people in the community seeking information on mental health.
- EMHS has secured over \$3.5 million in philanthropic funds and \$2.9 million in grants to support new community services as a result of the Community Health Needs Assessment it conducted in 2001.
- EMHS employs 6015 employees across the nine county service area, with 4400 of them living in the Bangor-Brewer area. These employees earn a total payroll of approximately \$296 million in their respective communities, \$229 of which was in the Bangor-Brewer area. Two widely accepted economic formulas suggest that:
  - a) Every health care job creates 1.6 jobs in the local economy; in other words, hiring one health care worker generates another .6 job in other area businesses.
  - b) 43% of consumer expenses go into retail goods.

From these formulas, it can be deduced that EMHS economic impacts on its communities include:

- a) a total of 9624 jobs in the nine counties, 7040 of which are in the Bangor-Brewer area.
  - b) 43% of employee payroll after taxes is spent on local goods and services; that is a significant local business stimulus considering the size of the payroll noted above in the entire region, as well as just the Bangor-Brewer area.
- EMHS has established a system bio engineering function targeting savings of approximately \$200,000 annually.
- EMHS has allocated or funded to date \$32.3 M in capital for a system wide, comprehensive computerized patient record. This combines computerized physician order entry, decision support, clinical documentation, patient billing and registration functions. The initial investment was made at EMMC that is developing and piloting the system. That investment is now being leveraged to install the same system in other smaller EMHS members, which could never have afforded such an endeavor alone.

- EMHS has provided permanent capital to maintain clinical services in rural Maine (mental health and primary care).
- EMHS has distributed clinical services to geographic regions throughout the nine county service area (eg. Aroostook County - cardiac cath, radiation therapy; Lincoln and Ellsworth - renal dialysis).
- EMHS is centralizing and standardizing administrative & support services (eg. IS, Finance, HR, Materials Management and Planning, Legal, etc.) which will save operating dollars and outside consultant fees.
- EMHS, as a system has allocated operating margin across the system and state (LifeFlight) for charitable functions such as Clinical Information Systems (electronic medical record, hospital and primary care practices), supporting physician practices to ensure access for increasing Medicaid eligibility, etc.
- These quantitative facts don't include the many qualitative EMHS benefits that result from sharing physician resources and collaborating on initiatives that raise the quality of care.
- EMHS through the system board Clinical Coordinating Committee is establishing system wide physician order sets and standardized clinical practice guidelines.